

Paul Zakian
129 East 82nd street, Apt 10A
New York, NY 10028

Pg 1 of 7
Chambers of Honorable James M. Peck
One Bowling Green
New York, NY 10004, Courtroom 601

September 26, 2010

In Regards to:

United States Bankruptcy Court, Southern District of New York
Lehman Brothers Holdings Inc et al Debtors
Chapter 11 Case No 08-13555 (JMP) Jointly Administered
Claim Number 36799
Date Filed 10/7/2009
Debtor : 08-13555
Classification Amt: Unsecured \$176,151.00

Dear Honorable Court and other relevant parties,

I am humbly writing to you to ask that you repeal the objection to my claim (#36799) which was filed 2 weeks late, as a result of an urgent family medical situation. I was required, as sole caretaker, to attend to the affairs of my mother who is 72 years old and lives alone in Wynnewood Pennsylvania, for two months as she endured double knee repair surgery and rehabilitation at Pennsylvania Hospital (documentation enclosed). As a result, I was restricted to accessing and acting on my personal affairs which includes this claim.

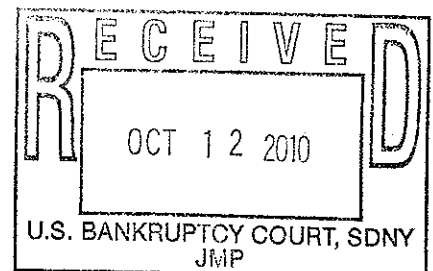
Please direct any reply to:

Paul Zakian
129 East 82nd Street, Apt 10A
New York, NY, 10028
917-826-1369

With Sincere regards



Paul Zakian



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Medicare Summary Notice

November 9, 2009

LAURA ZAKIAN
807 WICKFIELD RD
WYNNEWOOD PA 19096-1610



CUSTOMER SERVICE INFORMATION

Your Medicare Number: XXX-XX-2604D

If you have questions, call:
1-800-MEDICARE
(1-800-633-4227) (#12502)

Ask for Doctor Services
TTY for hearing impaired: 1-877-486-2048

BE INFORMED: Protect your Medicare number as you would a credit card number.

This is a summary of claims processed from 08/28/2009 through 10/19/2009.

PART B MEDICAL INSURANCE - ASSIGNED CLAIMS

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
Claim number 18-09279-262-880						
Bryn Mawr Medical Speci, 933 Haverford Rd, Bryn Mawr, PA 19010-3819						a
Dr. Mayer, Henry S. M.D.						
08/25/09	1 Cardiovascular stress test (93018)	\$273.00	\$17.12	\$13.70	\$3.42	
Claim number 11-09229-859-700						
Main Line Healthcare, P O Box 8538 227, Philadelphia, PA 19171-0001						a
Dr. Thaler, Malcolm S. M.D.						
08/14/09	1 Office/outpatient visit, est (99213)	\$100.00	\$65.14	\$52.11	\$13.03	
08/14/09	1 Routine venipuncture (36415)	20.00	3.00	3.00	0.00	b
08/14/09	1 Urinalysis nonauto w/o scope (81002)	15.00	3.74	3.74	0.00	b
Claim Total		\$135.00	\$71.88	\$58.85	\$13.03	

THIS IS NOT A BILL - Keep this notice for your records.

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Your Medicare Number: XXX-XX-2604D

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November 9, 2009**PART B MEDICAL INSURANCE - ASSIGNED CLAIMS (continued)**

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
Claim number 11-09236-580-320 Main Line Healthcare, P O Box 8538 227, Philadelphia, PA 19171-0001 Referred by: Dr. Booth Jr, Robert E., M.D. Dr. Thaler, Malcolm S. M.D.						
08/21/09	1 Office consultation (99244)	\$285.00	\$196.36	\$157.09	\$39.27	a
08/21/09	1 Admin influenza virus vac (G0008-GA)	25.00	22.64	22.64	0.00	b
08/21/09	1 Td vaccine no prsrv > / = 7 im (90714-GA)	50.00	0.00	0.00	50.00	c
	Claim Total	\$360.00	\$219.00	\$179.73	\$89.27	
Claim number 11-09268-212-050 Medical Assoc Of The MA, P O Box 843254, Boston, MA 02284-3254 Dr. Levy, Mark M.D.						
09/21/09	1 Initial inpatient consult (99253)	\$195.00	\$121.25	\$97.00	\$24.25	a
Claim number 11-09272-260-440 Medical Assoc Of The MA, P O Box 843254, Boston, MA 02284-3254 Dr. Levy, Mark M.D.						
09/22/09	1 Subsequent hospital care (99231)	\$80.00	\$39.09	\$31.27	\$7.82	
09/23/09	1 Subsequent hospital care (99232)	110.00	69.88	55.90	13.98	
09/24/09	1 Subsequent hospital care (99232)	110.00	69.88	55.90	13.98	
	Claim Total	\$300.00	\$178.85	\$143.07	\$35.78	
Claim number 11-09231-450-510 Pennsylvania Cardiology Asso, Farm Journal Buildin , 230 W Washington Sq 3Rd Fl, Philadelphia, PA 19106-3500 Referred by: Dr. Booth Jr, Robert E., M.D. Dr. Norris, Robert B. M.D.						
08/17/09	1 Office consultation (99244)	\$275.00	\$196.36	\$157.09	\$39.27	d,a
08/17/09	1 Electrocardiogram, complete (93000)	80.00	23.01	18.41	4.60	
	Claim Total	\$355.00	\$219.37	\$175.50	\$43.87	

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PART B MEDICAL INSURANCE - ASSIGNED CLAIMS (continued)

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
Claim number 11-09265-486-580 Pennsylvania Cardiology Asso, Farm Journal Buildin , 230 W Washington Sq 3Rd Fl, Philadelphia, PA 19106-3500 Latta, Patricia A. CRNP 09/15 - 17/09 3 Subsequent hospital care (99232)						
		\$330.00	\$178.20	\$142.56	\$35.64	d,a
Yoon, Julie O. NP 09/18/09 1 Subsequent hospital care (99232)						
		110.00	59.40	47.52	11.88	
	Claim Total	\$440.00	\$237.60	\$190.08	\$47.52	
Claim number 11-09252-323-020 Rad Assoc Of The Main Line, P O Box 225, Paoli, PA 19301-0225 Referred by: Dr. Norris, Robert B., M.D. Dr. Marek, Jennifer L.						
08/26/09	1 Heart wall motion add-on (78478-26GC) professional charge	\$136.00	\$28.98	\$23.18	\$5.80	a
08/26/09	1 Heart function add-on (78480-26GC) professional charge	136.00	18.89	15.11	3.78	
	Claim Total	\$272.00	\$47.87	\$38.29	\$9.58	
Claim number 11-09253-771-690 Rad Assoc Of The Main Line, P O Box 225, Paoli, PA 19301-0225 Referred by: Dr. Norris, Robert B., M.D. Dr. Marek, Jennifer L.						
08/26/09	1 Heart image (3d), multiple (78465-26GC) professional charge	\$320.00	\$83.32	\$66.66	\$16.66	a
Claim number 11-09268-221-720 Rehabilitation Associat, P O Box 843254, Boston, MA 02284-3254 Dr. Padhye, Rajendra S. M.D.						
09/18/09	1 Initial hospital care (99222)	\$210.00	\$128.92	\$103.14	\$25.78	
09/19/09	1 Subsequent hospital care (99232)	115.00	69.88	55.90	13.98	

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Your Medicare Number: XXX-XX-2604D

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November 9, 2009**PART B MEDICAL INSURANCE - ASSIGNED CLAIMS (continued)**

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
09/20/09	1 Subsequent hospital care (99232)	115.00	69.88	55.90	13.98	
09/21/09	1 Subsequent hospital care (99232)	115.00	69.88	55.90	13.98	
	Claim Total	\$555.00	\$338.56	\$270.84	\$67.72	
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Claim number 11-09272-270-020						
Rehabilitation Associat, P O Box 843254,						
Boston, MA 02284-3254						a
Dr. Padhye, Rajendra S. M.D.						
09/22/09	1 Subsequent hospital care (99232)	\$115.00	\$69.88	\$55.90	\$13.98	
09/23/09	1 Subsequent hospital care (99231)	82.00	39.09	31.27	7.82	
09/24/09	1 Hospital discharge day (99238)	160.00	70.00	56.00	14.00	
	Claim Total	\$357.00	\$178.97	\$143.17	\$35.80	
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Claim number 11-09271-199-840						
Rjk Medical Assoc Ltd, Co Cbs,						
8701D West Chester Pike ,						a
Upper Darby, PA 19082-0000						
Dr. Kreb III, Robert J. M.D.						
09/16/09	1 Initial inpatient consult (99253)	\$175.00	\$121.25	\$97.00	\$24.25	
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Claim number 11-09268-640-910						
Safecare Ambulance Services, 300 Domino Lane,						
Philadelphia, PA 19128-4352						a
09/18/09	1 bls (A0428-HH)	\$476.62	\$231.06	\$184.85	\$46.21	
09/18/09	30 Ground mileage (A0425-HH)	408.60	206.10	164.88	41.22	
	Claim Total	\$885.22	\$437.16	\$349.73	\$87.43	
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Claim number 18-09264-437-500						
Society Hill Anes Consult, PO Box 826190,						
Philadelphia, PA 19182-6190						a
Referred by: Dr. Booth Jr, Robert E., M.D.						
Peezick, Carol CRNA						
09/15/09	15 Anesth, knee arthroplasty (01402-QX)	\$805.00	\$248.54	\$198.83	\$49.71	c

Your Medicare Number: XXX-XX-2604D

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November 9, 2009**PART B MEDICAL INSURANCE - ASSIGNED CLAIMS (continued)**

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
Claim number 18-09264-437-920						
Society Hill Anes Consult, PO Box 826190, Philadelphia, PA 19182-6190						a
Referred by: Dr. Booth Jr, Robert E., M.D.						
Dr. Berman, David B. M.D.						
09/15/09	15 Anesth, knee arthroplasty (01402-QK)	\$1,955.00	\$248.54	\$198.83	\$49.71	e
09/15/09	1 Inject spine w/cath l/s (cd) (62319-59)	765.00	94.72	75.78	18.94	
09/15/09	1 Doc antibio given b/4 surg (4048F)	0.00	0.00	0.00	0.00	f
Claim Total		\$2,720.00	\$343.26	\$274.61	\$68.65	
Claim number 11-09267-157-830						
Society Hill Anes Consult, PO Box 826190, Philadelphia, PA 19182-6190						a
Dr. Glasser, Steven M.D.						
09/16/09	1 Hosp manage cont drug admin (01996)	\$255.00	\$66.87	\$53.50	\$13.37	
Claim number 11-09267-157-940						
Society Hill Anes Consult, PO Box 826190, Philadelphia, PA 19182-6190						a
Dr. Haas, Allen B. M.D.						
09/17/09	1 Hosp manage cont drug admin (01996)	\$255.00	\$66.87	\$53.50	\$13.37	
Claim number 18-09275-052-120						
Trustees Of The Univ Of, PO Box 0905, Philadelphia, PA 19175-0905						a
Referred by: Dr. Booth Jr, Robert E., M.D.						
Dr. Barroeta, Julieta						
09/15/09	2 Tissue exam by pathologist (88305-26) professional charge	\$440.00	\$78.24	\$62.59	\$15.65	
09/15/09	2 Decalcify tissue (88311-26) professional charge	56.00	25.08	20.06	5.02	
Claim Total		\$496.00	\$103.32	\$82.65	\$20.67	

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November 9, 2009**PART B MEDICAL INSURANCE - ASSIGNED CLAIMS (continued)**

Dates of Service	Services Provided	Amount Charged	Medicare Approved	Medicare Paid Provider	You May Be Billed	See Notes Section
Claim number 11-09247-816-670						
Univ Of Penn - Comm Rad, Suite 118, 999 Old Eagle School Road , Wayne, PA 19087-1707						a
Referred by: Dr. Booth Jr, Robert E., M.D.						
Dr. Kneeland, Bruce M.D.						
08/17/09	1 Chest x-ray (71020-26GC) professional charge	\$30.00	\$11.81	\$9.45	\$2.36	
Claim number 11-09275-536-560						
Univ Of Penn - Comm Rad, Suite 118, 999 Old Eagle School Road , Wayne, PA 19087-1707						a
Referred by: Dr. Booth Jr, Robert E., M.D.						
Dr. Love, Michael B. M.D.						
09/15/09	1 X-ray exam of knee, 1 or 2 (73560-26LT) professional charge	\$22.00	\$9.19	\$7.35	\$1.84	
09/15/09	1 X-ray exam of knee, 1 or 2 (73560-26RT) professional charge	22.00	9.19	7.35	1.84	
	Claim Total	\$44.00	\$18.38	\$14.70	\$3.68	
Claim number 18-09264-041-900						
3B Orthopaedics,P.C., PO Box 828079, Philadelphia, PA 19182-8079						a
Dr. Booth Jr, Robert E. M.D.						
09/15/09	1 Total knee arthroplasty (27447-50)	\$12,920.00	\$2,402.40	\$1,921.92	\$480.48	
Claim number 18-09264-041-910						
3B Orthopaedics,P.C., PO Box 828079, Philadelphia, PA 19182-8079						a
Marsicano, Marisa A. PA						
09/15/09	1 Total knee arthroplasty (27447-82AS50) assistant surgeon	\$1,530.00	\$326.73	\$261.38	\$65.35	